

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 1997

Application or Docket Number

09/152,458

CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

SMALL ENTITY
TYPE

OTHER THAN
SMALL ENTITY

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	19	minus 20 = *
INDEPENDENT CLAIMS	3	minus 3 = *
MULTIPLE DEPENDENT CLAIM PRESENT		

RATE	FEES
	395.00
x\$11=	
x41=	
+135=	
TOTAL	<i>395</i>

RATE	FEES
	790.00
x\$22=	
x82=	
+270=	
TOTAL	

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

SMALL ENTITY

OTHER THAN
SMALL ENTITY

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	22	Minus ** 20 = 2
Independent	*	3	Minus	*** 3 = 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

RATE	ADDITIONAL FEE
x\$11=	<i>18</i>
x41=	
+135=	
TOTAL ADDIT. FEE	<i>18 P</i>

RATE	ADDITIONAL FEE
x\$22=	
x82=	
+270=	
TOTAL ADDIT. FEE	

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	
	Total	*	Minus	**	=
Independent	*		Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

RATE	ADDITIONAL FEE
x\$11=	
x41=	
+135=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
x\$22=	
x82=	
+270=	
TOTAL ADDIT. FEE	

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	
	Total	*	Minus	**	=
Independent	*		Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					

RATE	ADDITIONAL FEE
x\$11=	
x41=	
+135=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
x\$22=	
x82=	
+270=	
TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

30866

CLAIMS AS FILED - PART I			SMALL ENTITY		OTHER THAN SMALL ENTITY			
(Column 1)		(Column 2)						
FOR	NUMBER FILED	NUMBER EXTRA		RATE	FEES	RATE	FEES	
BASIC FEE (37 CFR 1.16(a))					\$ 395			
TOTAL CLAIMS (37 CFR 1.16(c))	19 minus 20 =	* -0-	x \$ ____ =	-0-		OR	\$ _____	
INDEPENDENT CLAIMS (37 CFR 1.16(b))	3 minus 3 =	* -0-	x ____ =	-0-		OR	x \$ ____ =	
MULTIPLE DEPENDENT CLAIM PRESENT [*] (37 CFR 1.16(d))			+ ____ =	-0-		OR	x ____ =	
					TOTAL	395	OR	TOTAL

^{*} If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II			SMALL ENTITY		OTHER THAN SMALL ENTITY			
(Column 1)		(Column 2)		(Column 3)				
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
	Total (37 CFR 1.16(c))	*	Minus	**	=	x \$ ____ =		OR
Independent (37 CFR 1.16(b))	*	Minus	***	=	x ____ =		OR	x ____ =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			+ ____ =				OR	+ ____ =
					TOTAL		OR	TOTAL ADDIT. FEE

(Column 1)			(Column 2)		(Column 3)		ADDIT. FEE	
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
	Total (37 CFR 1.16(c))	*	Minus	**	=	x \$ ____ =		OR
Independent (37 CFR 1.16(b))	*	Minus	***	=	x ____ =		OR	x ____ =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			+ ____ =				OR	+ ____ =
					TOTAL		OR	TOTAL ADDIT. FEE

(Column 1)			(Column 2)		(Column 3)		ADDIT. FEE	
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
	Total (37 CFR 1.16(c))	*	Minus	**	=	x \$ ____ =		OR
Independent (37 CFR 1.16(b))	*	Minus	***	=	x ____ =		OR	x ____ =
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			+ ____ =				OR	+ ____ =
					TOTAL		OR	TOTAL ADDIT. FEE

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

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Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case.

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